



## Kayak/Canoe Program NPS Release and Waiver of Liability

Please read the following carefully. By registering for a program or activity, I acknowledge acceptance of this waiver. I am aware that the courses of activities that I am participating in include certain risks including but not limited to bodily injury, death, illness, loss or damage to personal property and other safety-related dangers. I understand that the unique character of the program include certain risks that cannot be eliminated. I assume responsibility for my own safety and loss or damage to personal property. I understand that I am responsible for providing my own personal health and accident insurance. The National Park Service has provided me with information pertaining to the risks involved and I am voluntarily participating in these activities. I acknowledge other dangers not mentioned may exist I release and hold harmless the National Park Service, its employees, staff, board of directors, members, instructors, volunteers, and their representatives from an and all claims as a result of my participation in these activities. I understand instructors may be required to make decisions under difficult circumstances and I give permission for instructors, staff and emergency personnel to make necessary first aid decisions in the event of accident, injury or illness. I understand activities may involve remote locations where communication and transportation or evacuation procedures performed by the National Park Service or other personnel and equipment. I agree to reimburse the NPS for any damage to their equipment if I fail to take reasonable care of the equipment placed in my care. I understand the registration cancellation policy and that I will not be reimbursed if I fail to complete a course or activity. I understand NPS reserves the right to cancel or change activities without prior notice and reserves the right to cancel the registration of any participant if it determines fails to meet the requirements for these activities. My participation in this program or activity is purely voluntary. I agree to allow NPS the use of my name and likeness from photograph, digital image, or video taken during these activities to promote NPS activities or to create sales items. I agree to allow NPS to use any written materials, testimonials, artwork, video, or photographs I produce as part of this activity/program that I submit to NPS to promote NPS activities or to create sales items and I consent to and authorize such use without restrictions.

**I understand the physical requirements of participation in these activities and affirm I meet these requirements.**

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Name

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Signature

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Date

**A parent or guardian must also sign if the participant is a minor. As the parent or guardian of the minor participating in this activity I acknowledge I have read and understood the release and liability waiver and accept full responsibility for the participation by the minor.**

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Guardian's name

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Signature

Emergency Contact Name \_\_\_\_\_

Phone number Day/Evening/Cell \_\_\_\_\_